

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY EXPENSE OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEES

IN UNITED STATES MAGISTRATE DISTRICT APPEALS COURT or OTHER PANEL (Specify below)

IN THE CASE

US v. E. Lee

FOR

AT

LOCATION NUMBER

6/28/04

PERSON REPRESENTED (Show your full name)

Emmanuel Lee

CHARGE/OFFENSE (describe if applicable & check box) Felony
 Misdemeanor

1 Defendant - Adult
 2 Defendant - Juvenile
 3 Appellant
 4 Probation Violator
 5 Parole Violator
 6 Habeas Petitioner
 7 2255 Petitioner
 8 Material Witness
 9 Other

DOCKET NUMBERS	
Magistrate	04-1804-CBS
District Court	
Court of Appeals	

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOY- MENT	Are you now <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed	
	Name and address of employer: _____	
	IF YES, how much do you earn per month? \$ _____	
ASSETS	IF NO, give month and year of last employment <u>3/04</u> How much did you earn per month? \$ <u>2000 mo</u>	
	If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	IF YES, how much does your Spouse earn per month? \$ _____	
OTHER INCOME	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____	
	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES RECEIVED \$ _____ SOURCES _____	
PROP- ERTY	CASH Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ _____	
	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	IF YES, GIVE THE VALUE AND \$ DESCRIBE IT VALUE _____ DESCRIPTION _____	
OBLIGATIONS & DEBTS	DEPENDENTS MARITAL STATUS Total No. of Dependents SINGLE _____ List persons you actually support and your relationship to them MARRIED _____ SON Emmanuel WIDOWED _____ SEPARATED OR DIVORCED _____	
	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME: <u>\$570</u> Creditors <u>0</u> Total Debt \$ <u>570</u> \$ _____ \$ _____ \$ _____ \$ _____ \$ _____

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

6/28/04

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED) 